



Evaluation, Remediation Policy

Effective July 2003
Revised: June 2011
Expiration: Indefinite

I. PURPOSE

This policy supplements and incorporates the Tufts Medical Center Graduate Medical Education Policy (GME 01-B) on Evaluation, Advancement and Remediation of House Officers, and the Procedures (GME 01-C) for Discipline and Dismissal of House Officers and Appeals Process. It is designed to establish criteria and processes by which the Transitional Year Residency Program will evaluate, offer academic remediation, and if necessary dismiss Residents in a fair and equitable manner.

II. EVALUATION

A. Evaluation Standards

The TY Resident evaluation is based on written program and rotation specific goals and objectives. These goals and objectives are reviewed annually and revised as needed by the Program, are made known to the faculty and provided to the GME Committee upon its review of the Program.

These objectives are available on the program website <http://www.mass.gov/shattuckhospital> and provided to the TY Resident prior to each rotation and based on the following 6 competencies:

1. Patient care
2. Medical Knowledge
3. Practice based learning and improvement
4. Interpersonal and communication skills
5. Professionalism
6. System based practice

B. Monthly Rotation Evaluations

Within two (2) weeks of completing each scheduled rotation, faculty members would complete a competency based evaluation on MyEvaluations.com. This evaluation will review the TY Resident achievement of the goals & objectives for his/her educational and professional development for that rotation and any other relevant information about the TY Resident performance. Copies of these evaluations are kept in the TY Resident file.

C. 360 Evaluation

Twice (2) a year each transitional year resident will have a 360 evaluation form. These evaluations are performed by patients, secretaries, nurses, students, ancillary staff and others. These evaluations are kept in the TY Resident file.

D. Medical Record Report

A medical record compliance report will be provided to each transitional year resident on a monthly basis. A copy of that report is provided to the Program Director and Chair of Medicine to ensure compliance.

E. Self Evaluation

Each Transitional Year Resident will complete a self evaluation at the beginning and end of the year.

F. Summary Evaluation

The Program Director should evaluate each TY Resident at least semiannually, unless required more frequently, for evidence of satisfactory progressive scholarship, professional growth and progress, and professional competence including demonstrated ability to assume increasing responsibility for patient care. The evaluations will be based in part on the monthly rotation evaluations provided by faculty members at the end of each rotation, 360 evaluation, medical record compliance report and Mini-cex evaluations. The evaluations must be accurately documented, dated and signed by both the Program Director and the TY Resident. Copies of these evaluations are kept in the TY Resident file.

G. Final Evaluation

The Program Director should evaluate each TY Resident at the end of the year. This evaluation will document the TY Resident's performance during the final period of education and will verify that the TY Resident has demonstrated sufficient competence in all of the following 6 competencies in order to graduate from the TY Program:

1. Patient care
2. Medical Knowledge
3. Practice based learning and improvement
4. Interpersonal and communication skills
5. Professionalism
6. System based practice

This evaluation will be cosigned by the TY Program Director and the TY Resident and will be part of the TY Resident permanent record.

H. Transitional Year Resident Review of Evaluations

The evaluations are reviewed with the TY Resident quarterly during the Advisor meeting and twice a year during the Program Director meeting. The TY Resident must review and sign the evaluation prior to being placed in the TY Resident program file. The TY Resident has the right to place in his/her file a written response or written comments to his/her evaluations.

I. TY Resident Evaluation of the Program

After each rotation TY Residents will evaluate the supervising physician and the rotation. An evaluation of all components of the Transitional Year Program will be provided to the Transitional Year Resident twice (2) a year.

J. Counseling; Remediation

Ongoing counseling to TY Resident regarding his/her performance in the program, outcome assessment of each of the general competencies and behavioral and personal issues is provided by the Program Director and the assigned Advisor. Any TY Resident whose performance is assessed to be less than satisfactory by the Program Director may be placed on remedial training status for a specific period of time. The Program Director shall inform the TY Resident in writing of the deficiencies noted in academic, clinical and/or

professional performance, and shall outline a program of remediation, including criteria for successful completion. Documentation of the remedial training program and outcome shall be maintained in the TY Resident file.

III. TY Resident Access to Program File

At the TY Resident's request, the Program Director, within two (2) business days, shall provide the TY Resident with access to, or a copy of, his/her Program File. Note, however, that documents subject to the peer review privilege or documents upon which the Program did not rely in evaluating the TY Resident shall not be considered part of the Program File and shall not be available for the TY Resident's review.